

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000027990

**FILED**  
**Oct 03, 2011**  
**Secretary of State**

**Entity Name:** UNIQUE LIFE INSURANCE CONCEPTS, LLC

**Current Principal Place of Business:**

301 GARDEN ROAD  
PALM BEACH, FL 33480 US

**New Principal Place of Business:**

**Current Mailing Address:**

301 GARDEN ROAD  
PALM BEACH, FL 33480 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

EPSTEIN, MARC G  
2900 WEST CYPRESS CREEK ROAD  
SUITE 9  
FORT LAUDERDALE, FL 33309 US

**Name and Address of New Registered Agent:**

GOLDSTEIN, ROBERT S  
301 GARDEN ROAD  
PALM BEACH, FL 33480 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT GOLDSTEIN

10/03/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GOLDSTEIN, ROBERT S  
Address: 301 GARDEN ROAD  
City-St-Zip: PALM BEACH, FL 33480 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT GOLDSTEIN

MGR

10/03/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date